CAMPAIGN FINANCIAL DISCLOSURE REPORT



SUMMARY PAGE (Please Print or Type) 18 JUN 13 PM 03:56

Rev. 5/11

SECRETARY OF STATE STATE OF IDAHO

OCCION I				
Name of Candidate or Political Committee and Chairperson Idahoans for Healthcare			Office Sought (if cand	didate) District (if any)
Mailing Address		City and Zip	Home Phone	
PO Box 2835		Boise 83701	Florie Florie	2083447799
Name of Political Treasurer Bruce Belzer				
Mailing Address		City and Zip	Home Phone	Work Phone
PO Box 2835		Boise 83701		2083447799
Change of address for: Candida	te or Political Committe	ee D Political Tr	easurer	
Section II This filing is an: Original	Amendmen	TYPE OF REPORT		
This report is for the period from $\underline{04}$	/ 30 / 2018 thro	ough <u>05 / 25 / 20</u>)1 <u>8</u>	
7 Day Pre-Primary Report	2 30	Day Post-Primary Repor	t Octob	per 10 Pre-General Report
7 Day Pre-General Report	30	Day Post-General Repor	t Annu	al Report
Semi-Annual Report (Statew	vide Candidates Only)			
Is this a Termination Report:	Yes No			
Section III Directions: If you had no contribution Be sure to contribution	ns or expenditures duri			
✓ I hereby certify that	I have received no con	tributions and have made	no expenditures during th	is reporting period.
Section IV		SUMMARY		
To reach your Calendar Year to Date figures to the Column II figures of your		Column I	COLUMN I This Period	COLUMN II Calendar Year to Date
Line 1: Cash on Hand January 1, This	Calendar Year*		\$_XXXXXX	\$ 0.00
Line 2: Enter Beginning Cash Balance	**		\$_0.00	\$XXXXXX
Line 3: Total Contributions (Enter amo	unt from line 5, page 2)	1	\$_0.00	\$ 0.00
Line 4: Subtotal (Add lines 1, 2 and 3)			\$_0.00	\$ <u>0.00</u>
Line 5: Total Expenditures (Enter amount	unt from line 11, page 2	2)	\$_0.00	\$ 0.00
Line 6: Enter Ending Cash Balance (S	ubtract line 5 from line	4)	\$_0.00	\$ 0.00
Line 7: Outstanding Debt to Date (Enter	er amount from line 18,	page 2)	\$_0.00	
*This same figure should be entered o **This is the figure on line 6 of the last Note: The closing cash balance for the	Campaign Financial D	isclosure Report filed. If the		
Section	V			
Return This Report To: Lawerence Denney				
Secretary of State PO		e Belzer lame of Political Treasurer	, hereby certify	that the information in this
Box 83720 Boise ID 83720-0080			aign Financial Disclosure I	Report as required by law.
Phone: (208) 334-2852 Fax: (208) 334-2282			Digital Signature	
			Signature of Political Trea	acuror .

DETAILED SUMMARY

Name of Candidate or Committee: Idahoans for Healthcare

			Total This Period
	Contributions		
1	Unitemized Contributions (\$50 and less) # of Contributors O	+	\$0.00
2	Itemized Contributions (Total of all Schedule A sheets)	+	\$0.00
3	In-Kind Contributions (Total of all Contribution amounts from Schedule C sheets)	+	\$0.00
4	Loans (Total of all New Loan amounts from Schedule D sheets)	+	\$0.00
(5)	Total Contributions (Transfer this figure to page 1, Section IV, Line 3)	=	\$0.00

	Expenditures		
6	Unitemized Expenditures (Less than \$25) # of Expenditures O	+	\$0.00
7	Itemized Expenditures (Total of all Schedule B sheets)	+	\$0.00
8	In-Kind Expenditures (Total of all Expenditure amounts from Schedule C sheets)	+	\$0.00
9	Loan Repayments (Total of all Loan Repayment amounts from Schedule D sheets)	+	\$0.00
10	Credit Card and Debt Repayments (Total of all Repayment amounts from Schedule E sheets)	+	\$0.00
(11)	Total Expenditures (Transfer this figure to page 1, Section IV, Line 5)	=	\$0.00

	Loans, Credit Cards and Debt		
12	Outstanding Balance from previous reporting period	+	\$0.00
13)	New Loans received during this reporting period (Total of all New Loan amounts plus Accrued Interest from Schedule D sheets)	+	\$0.00
14)	New Credit Card and Debt incurred this reporting period (Total of all New Incurred Debt amounts from Schedule E sheets)	+	\$0.00
15)	Subtotal	=	\$0.00
16)	Repayments of Loans made during this reporting period (Total of all Loan Repayment amounts from Schedule D sheets)	-	\$0.00
17)	Repayments of Credit Card and Debt this reporting period (Total of all Debt Repayment amounts from Schedule E sheets)	-	\$0.00
18)	Total Outstanding Balance at close of this period (Transfer this figure to page 1, Section IV, Line 7)	=	\$0.00

	Pledged Contributions		
19	Unitemized Pledged Contributions (\$50 and less) # of Pledges O	+	\$0.00
20	Itemized Pledged Contributions this Period (Total of all Schedule F sheets)	+	\$0.00
21)	Total Pledged Contributions this period	=	\$0.00